

AMENDED MINUTES
Wednesday, January 18, 2006

State Planning Project for the Uninsured
Advisory Council Meeting

Michigan Manufacturers Association
620 S. Capitol Avenue
Lansing, Michigan 48901

Members Present: Elaine Beane, Center for Advancing Community Health (ex-officio member); Debra Brinson, School-Community Health Alliance; Jan Christensen, MDCH; Paul Duguay, Michigan Association of Health Plans; Rob Fowler, Small Business Association of Michigan; Steve Gools, AARP of Michigan; Larry Horwitz, Economic Alliance; Mary Ellen Howard, Free Clinics of Michigan; Jan Hudson, Michigan League for Human Services; Joan Moiles, Department of Labor and Economic Growth; Colette Scrimger, Access to Health Care Coalition; Kevin Seitz, Blue Cross Blue Shield of Michigan; Susan Sevensma, Michigan Osteopathic Association; Amy Shaw, Michigan Manufacturer's Association; Kim Sibilsky, Michigan Primary Care Association; Kimberly Singh, Michigan Association for Local Public Health; Hollis Turnham, Paraprofessional Healthcare Institute (ex-officio member); Pam Yager, Office of the Governor; Lody Zwarensteijn, Alliance for Health

Alternates Present: Ben Bodkin, Michigan Association of Counties; Patience Drake-Rosenbaum, Michigan Consumer Health Care Coalition for Beverley McDonald; Sarah Fink, Michigan Health & Hospital Association; David Green, MI Universal Health Care Action Network for Marjorie Mitchell; Pooja Naik, Michigan State Medical Society for Kevin Kelly; Ed Wolking, Jr., Detroit Regional Chamber for Sebastian Wade; Lynda Zeller, Alliance for Health; Jane Zwiers, Free Clinics of Michigan

Members Absent: Chris Allen, Detroit-Wayne County Health Authority; Vernice Davis Anthony, Greater Detroit Area Health Council; William Black, Michigan Teamsters Joint Council #43; Martin Dodge, Kalamazoo Regional Chamber of Commerce; Denise Holmes, Michigan State University, School of Medicine; Stephen Skorcz, Greater Flint Health Coalition, Marge Faville, SEIU Local 79.

Others Present: Gary Benjamin, Michigan Legal Services/MiUHCAN; Tameshia Bridges, Paraprofessional Healthcare Institute; Dave Cluley, Michigan Association of Health Underwriters; Jackie Doig, Center for Civil Justice; Eileen Ellis, Health Management Associates; Del Malloch, Jackson Health Plan Corp-3-Share; Margaret Meyers, Mercy Primary Care Center; Cherie Mollison, Office of Services to the Aging; Michelle Munson-McCorry, Complete Compassionate Care; Robert Meeker, Spectrum Health System; Bruce Miller, Northern Health Plan; Robert Parks, SCHA-MI; Vic Sztengel, Wexford Mercy PHO; Sarah Szwedja, Michigan Quality Community Care Council; Don VeCasey, Michigan Consumer Healthcare Coalition; Scott Woods, Priority Health

MDCH Staff: William Hart, Lonnie Barnett, Ken Miller, Angela Awrey, Umbrin Ateequi, Ellen Speckman-Randall

- I. **Welcome and Introductions:** Co-chairpersons Jan Christensen and Kevin Seitz called the meeting to order. Kevin Seitz welcomed all attendees. Introductions were made around the room.
- II. **Approval of Agenda:** The agenda was approved by consensus.
- III. **Approval of December 5th Minutes:** Larry Horwitz asked that the minutes include the names of members absent, in addition those present. The minutes were approved by consensus.
- IV. **Update on State Planning Project for the Uninsured:**
 - a. Jan Christensen gave a brief overview of the project. The project began in earnest in May of 2005. The timeline for the project is aimed at finalization of

recommendations in March for a final roll-out in May during the Cover the Uninsured week. Handouts providing highlights from the Household and Employer Surveys, as well as the Town Hall meetings, were included in packets provided to Advisory Council members.

- b. Table of Contents for Final Report: A draft table of contents was given to each member in their materials. The table of contents was developed to guide Advisory Council discussions to insure that all critical issues are addressed.

V. Each council member was given the opportunity to provide candid comments about extending health insurance to all Michigan residents in Michigan. The following were considered in their comments:

- a. What expansion options could they support?
- b. What expansion option were they opposed to?
- c. What expansion options were they willing to consider?
- d. What haven't they heard that needs to be discussed?

Each council member was given the opportunity to provide comments about how their organization feels about the extending health insurance coverage, what they would support, and what they oppose. Discussion followed.

Co-chairperson Jan Christensen summarized the discussion and the areas where there seemed to be a consensus forming. He stated that there was agreement that everyone should have access to coverage and high quality care. Although there is not agreement on the long-term solutions for achieving 100% coverage, it appears that we will be able to reach agreement on some short-term steps, while at the same time agreeing to continue the dialogue. We may be able to develop a structure or mechanism to carry-on the things that we agree to, while at the same time continuing the dialogue needed to reach a consensus on long-term solutions. Short-term successes will allow us to further our efforts and build trust.

Other themes in the discussion included the infeasibility of expanding Medicaid unless provider reimbursement rates were increased, lack of support for new taxes including new business taxes, the need for incentives that slows the erosion of employer-sponsored health insurance, and the need to move forward with some alacrity, as each step in a multi-step process comes with inherent costs. Other comments included the need to look at health insurance for health care workers, concerns about escalating health care costs and cost shifting, and the need to look at cost containment measures including patient safety, and information technology.

VI. Candid discussion and consensus on expansion options that are achievable. Co-chairperson Kevin Seitz provided a brief overview of what he heard from around the table. There was no general agreement on single payer. An overarching statement is needed to demonstrate support for 100% coverage, stated in business competitiveness terms. In the short-term, we can explore Medicaid or Medicaid-like expansion (but need to acknowledge concerns surrounding reimbursement rates), reinforce the employer-based market by reducing the cost of health care, and identify opportunities to strengthen

and support the safety net system. A broad public discussion is needed to build greater public understanding of the problem and consensus on solutions.

Discussion followed, and the following motions were all moved and supported by the Council.

1. We support 100% health insurance coverage for Michigan residents. In addition, we recommend a public education initiative to inform residents of the nature and severity of Michigan's health crisis; this would be launched by the Advisory Council. Some of the implications are the following: increased health care problems for those without insurance and thus timely and adequate access to health care services; reduced competitiveness for Michigan employers, especially internationally; cost shifting to those with insurance and those who pay for insurance; financial endangerment of Michigan hospitals and other safety net providers, etc.
2. Staff is instructed to bring back detailed information regarding the proposed Medicaid expansion?/waiver for those somewhat above current Medicaid levels. MDCH staff should develop a briefing paper on possible sources of funding, populations to be covered and expected costs. The report should also cover the adequacy of provider rates for health care providers who serve current recipients.
3. The Advisory Council recommends the creation of a health cost containment council to look at issues of health care cost escalation. Because rising costs are at the root of our health care crisis, incorporating cost containment initiatives into long-term solutions must be a priority. This council should also look at the inextricably intertwined issues related to access and quality of health care.
4. We agree to recommend that a priority concern should be the strengthening of safety net provider services.

VII. **Public Comment:** None

VIII. **Other Business:** None

IX. **Adjourn:** The meeting adjourned at 3:30pm.

Next Meetings: **February 8, 2006**
 10am to 4pm
 Michigan Manufacturers Association

February 22, 2006
10am to 4pm
Lake Ontario Room
State Library